2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004958

Apr 27, 2009 Secretary of State

Entity Name: SEMINOLE COUNTY YOUTH FOOTBALL LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

1020 CHESTERFIELD CIRCLE 104 SUNSET DRIVE

WINTER SPRINGS, FL 32708 LONGWOOD, FL 32750 US US

Current Mailing Address: New Mailing Address:

P.O. BOX 196280 P.O. BOX 181211

WINTER SPRINGS, FL 32719 US CASSELBERRY, FL 32718 US

FEI Number: 56-2578163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RILEY, TONY A RILEY, TONY A 1020 CHESTERFIELD CIRCLE 104 SÚNSET DRIVE

WINTER SPRINGS, FL 32708 US LONGWOOD, FL 32750 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

LAKINS, STEVE RILEY, TONY A Name: Name: 132 LORI ANNE LANE Address: 104 SUNSET DRIVE Address:

City-St-Zip: WINTER SPRINGS, FL 32708 US City-St-Zip: LONGWOOD, FL 32750 US

Title: SEC () Delete Title: SEC (X) Change () Addition Name: RILEY, BRENDA J Name: RILEY, BRENDA J

Address: 51 SOUTH FAIRFAX AVE. Address: 104 SUNSET DRIVE City-St-Zip: WINTER SPRINGS, FL 32708 US City-St-Zip: LONGWOOD, FL 32750 US

Title: **PRES** (X) Delete Title: () Change () Addition

RILEY, TONY A Name: Name: 1020 CHESTERFIELD CIRCLE Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONY RILEY **PRES** 04/27/2009